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PTO/SB/06 (08-03)

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 OTHER THAN CLAIMS AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) NUMBER FILED NUMBER EXTRA FOR RATE FEE RATE FEE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = X S OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = X S OR X S MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR = * If the difference in column 1 is less than zero, enter "0" in column 2. **TOTAL** OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 3) (Column 1) (Column 2) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST **PRESENT** REMAINING NUMBER RATE ADDI-RATE ADDI-**EXTRA** ENDMENT AFTER **PREVIOUSLY TIONAL** TIONAL AMENDMENT PAID FOR FEE FEE Total Minus 2 (37 CFR 1.16(c)) OR X S Independent (37 CFR 1.16(b)) Minus = ٨ X S x s OR Ž FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST മ PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-**AMENDMENT AFTER PREVIOUSLY EXTRA** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total (37 CFR 1.16(c)) Minus X \$ X S OR Independent (37 CFR 1.16(b)) Minus ٨ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-ENT **EXTRA PREVIOUSLY AFTER** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total Minus = ENDM (37 CFR 1.16(c)) X S OR X S Independent (37 CFR 1.16(b)) Minus X S OR X \$ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATION FEE DETERMINATION RECORD Effective November 10, 1998														
CLAIMS AS FILED - PART I (Column 1) (Column 2)										ENTITY	OB	OTHE	THAN	1
FOR			NUMBER FILED			NUMBER	RAT	_	FEE	7	RATE	FEE	┪	
BASIC FEE										380.00	OR		760.00	1
TOTAL CLAIMS			/					X\$ 9)=		OR			1
INDEPENDENT CLAIMS			└ minus 3 = * /					X39	=	<u> </u>	1	X78=	78	┨
MULTIPLE DEPENDENT CLAIM PRESENT									<u></u>	OR	:	7.6	d	
* If the difference in column 1 is less than zero, enter "0" in column 2								+130	_		OR	<u> </u>	0.0	4
									AL -	<u></u>	OR	TOTAL	838	┨
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									LL: I	ENTITY	OR	OTHER SMALL		
AMENDMENT A		REM A	AIMS IAINING FTER IDMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
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		(Cole	umn 1)		: . (C	Column 2)	(Column 3)	ADDIT. F	EE		JON .	ADDIT. FEE	10200	ł
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+130	-		OR	+260=		1
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•			ımn 1) Alms	Timologia		olumn 2)	(Column 3)				•		•	
MENT C		REM/ AF	AINING TER DMENT		PR	HIGHEST NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE,	ADDI- TIONAL FEE	
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	FIRST PRESE	JLTIPLE DEF		╅		OR		100	V					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE											OR	+260=	V = 1	
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Application or Docket Number